

ST. LOUIS COUNTY
Monthly Insurance Rates Effective 1/1/2020
Full Time Employees

I. St. Louis County Comprehensive Major Medical

Coverage	Cost Sharing		Employer Share		Employee Share		Total Cost of Coverage
	ER	EE	Share		Share		
Single	91%	9%	\$893.85	+	\$88.40	=	\$982.25
Family	82%	18%	\$1,870.66	+	\$410.63	=	\$2,281.29

Bargaining units under rate structure in Section I.:

Merit System Basic	Management Comp
Civil Service Basic	Unrepresented
County Commissioners	Highway Maintenance Division
MN Courts	

II. St. Louis County Comprehensive Major Medical

	Employer Share of Single Coverage		Employer Share of Dependent Coverage		Total Employer Share		Employee Share of Dependent Coverage		Additional Employee Share or Surcharge		Total Employee Share		Employee Share Not Funded		Total Cost of Coverage
Single	\$822.49	+	\$0.00	=	\$822.49		\$0.00	+	\$72.72	=	\$72.72	+	\$87.04	=	\$982.25
Family 80/20	\$822.49	+	\$1,039.23	=	\$1,861.72		\$259.81	+	\$72.72	=	\$332.53	+	\$87.04	=	\$2,281.29
Family 70/30	\$822.49	+	\$909.33	=	\$1,731.82		\$389.71	+	\$72.72	=	\$462.43	+	\$87.04	=	\$2,281.29

Bargaining units under rate structure in Section II:

<u>80/20</u>	<u>70/30</u>
ARC Basic	Unclassified Investigators
ARC Essential	Unclassified Attorneys
ARC Directors	Deputy Sheriffs
ARC Unclassified	Jail/911
ARC Supervisory	Confidential
	CS Supervisors

III. Employee Dental - 100% Employer Paid

\$40.16 Employer Share

IV. Dependent Dental - 100% Employee Paid

\$45.35 Spouse
 \$31.30 One Child
 \$79.70 Family (2+ dependents)

VI. Basic Life Insurance - 100% Employer Paid

\$0.09 per \$1,000 in coverage

VII. Vision - 100% Employee Paid

\$5.85 Employee Only
 \$10.96 Employee + One Dependent
 \$16.85 Employee + Two or more Dependents

VIII. COBRA

Medical	\$1,001.90 Single	\$2,326.92 Family
Medical - Former Spouse	\$45.63 EE w/Family	\$1,001.90 EE w/Single
Employee Dental	\$40.96	
Dependent Dental - Spouse	\$46.26	
Dependent Dental - Former Spouse	\$1.59 EE w/Family	\$46.26 EE w/single
Dependent Dental	\$31.93 One Child	\$81.29 Family
Vision	\$5.97 One Beneficiary	\$11.18 Two Beneficiaries \$17.19 Three or more Beneficiaries